

K060172

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510(k) SUMMARY OF SAFETY AND EFFECTIVENESS  
for  
REMA Shaver Blades

February 20<sup>th</sup>, 2006

1. Submitter Information:

a. Manufacturer/ Applicant:

Name: REMA Medizintechnik GmbH  
Address: In Breiten 10  
D-78589 Duerbheim- Tuttlingen  
Germany  
Telephone: 0049 7424-4064  
Fax: 0049 7424-501590  
E-Mail: info@rema-surgery.com

**MAY 31 2006**

b. Correspondent:

Name: Innovative Endoscopy Components, LLC  
Address: 731-733 Shotgun Road  
Ft. Lauderdale, FL 33326  
Telephone: (954) 217-8780  
Fax: (954) 217-8781  
E-Mail: info@endoscopy.md

2. Device Name:

Classification Name: Arthroscope Accessories  
Classification Number: 888.1100 Class II  
Proprietary Name: REMA Shaver Blades

3. Predicate Device:

K023777, Arthronet Blackline Shaver Blades  
K953695, Smith & Nephew Dyonics Arthroscopic Blades  
K955914, Smith & Nephew Dyonics Arthroscopic Blades  
K901735, MicroAire Surgical Blades  
K963332, Stryker Shaver Blades  
K943985, Linvatec Shaver Blades  
K990524, Linvatec E9000 System  
K041824, NeXtra Arthroscopic Shaver  
K030009, Karl Storz Powershaver System S2

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4. Description of Device:

The REMA Shaver Blades consists of an outer tube with a hub and a rotating inner tube with a connector. The inner and outer tube consists of stainless steel. The hub and connector can consist of stainless steel or Polyphenylsulfone (PPSU). The components are designed and intended to be operated exclusively as a unit.

5. Indication for use:

The REMA Shaver Blades are intended to provide shaving, cutting and abrading of bone and tissue during arthroscopic surgical procedures conducted by qualified surgeons.

6. Description of safety and substantial equivalence:

The biological safety of the REMA Shaver Blades has been defined through the selection of materials that demonstrated appropriate levels of biocompatibility, which constitute the building blocks of the proposed device.

These materials are similar or identical to those used for the manufacturing of the predicate devices as well as other brands legally sold in the USA.

7. Summary:

Biocompatibility, function, indications and designs have been developed to ensure the safety of this device and it is substantially equivalent to commercially approved shaver systems available for sale in the USA.



MAY 31 2006

Food and Drug Administration  
9200 Corporate Boulevard  
Rockville MD 20850

REMA Medizintechnik GmbH  
% Innovative Endoscopy Components, LLC  
Mr. Florian Gruber  
731-733 Shotgun Road  
Ft. Lauderdale, Florida 33326

Re: K060172  
Trade/Device Name: REMA Shaver System  
Regulation Number: 21 CFR 888.1100  
Regulation Name: Arthroscope  
Regulatory Class: II  
Product Code: HRX  
Dated: May 18, 2006  
Received: May 22, 2006

Dear Mr. Gruber:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

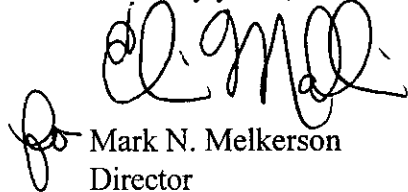
Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set

forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at (240) 276-0115. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address <http://www.fda.gov/cdrh/dsma/dsmamain.html>

Sincerely yours,

A handwritten signature in black ink, appearing to read "M. Melkerson", is written over a horizontal line.

Mark N. Melkerson  
Director  
Division of General, Restorative  
and Neurological Devices  
Office of Device Evaluation  
Center for Devices and  
Radiological Health

Enclosure

K060172

## Indications for Use

510(k) Number (if known): K060172

Device Name: REMA Shaver System

Indications For Use:

The REMA Shaver Blades are intended to provide shaving, cutting and abrading of bone and tissue during arthroscopic surgical procedures conducted by qualified surgeons.

Prescription Use ☒ AND/OR Over-The-Counter Use \_\_\_\_\_ (Part 21 CFR 801 Subpart D) (21 CFR 801 Subpart C)

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF NEEDED)

Concurrence of CDRH, Office of Device Evaluation (ODE)

  
(Division Sign-Off)

Division of General, Restorative,  
and Neurological Devices

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